

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>		07-14-01
O.I.P.E. CLASSIFIER	<i>[Signature]</i>	32	7/24/01
FORMALITY REVIEW	TH	1118	8-24-01
RESPONSE FORMALITY REVIEW	Zm	927	11-06-01

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 ÷ ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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95/11/07/01